

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: MANITOBA HOUSE (0010233)
Address: 10303 W MANITOBA ST, WEST ALLIS, WI 53227
License Status: REGULAR
Licensed/Certified/Registered 10/07/2003
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095801 **End Date:** 10/27/2005 **Type:** STANDARD **Purpose:** SURVEY/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008849 Served 11/02/2005

| <u>Deficiencies Cited</u> | <u>Subject Area</u> | <u>Compliance Verified</u> | <u>Corrected</u> |
|---------------------------|---|--------------------------------|------------------|
| 88.05(4)(a) | FIRE SAFETY-FIRE EXTINGUISHERS | | |
| 88.05(4)(b)2 | SMOKE DETECTORS-TESTING AND MAINTENANCE | | |
| 88.07(3)(e)1 | MEDICATION- RECORD KEEPING | | |

Survey ID: 0091213 **End Date:** 10/07/2003 **Type:** INITIAL **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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